

MONTANA CHEMICAL DEPENDENCY CENTER POLICY AND PROCEDURE MANUAL

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| Policy Subject: TB Patients, Tuberculosis Screening for MCDC Patients | |
| Policy Number: ICP 14 | Standards/Statutes: ARM 37.27.130 |
| Effective Date: 01/01/02 | Page 1 of 3 |

PURPOSE:

To prevent the spread of tuberculosis through screening of all new admissions for communicable tuberculosis.

POLICY:

All new admissions will receive tuberculosis screening at the time of admission, and a patient must be evaluated free from communicable tuberculosis to remain at MCDC.

I. PROCEDURE:

- A. All patients upon admission will have a Mantoux (5U PPD) test. Exceptions to this rule are:
- B. A patient that had a Mantoux test within the last 30 days prior to this admission and can produce documentation of recent Mantoux test.
- C. A patient that reports a previously positive Mantoux test.
- D. If a patient reports a positive PPD history during the admission assessment:
- E. The patient will not receive a Mantoux test.

II. The nurse shall complete a Positive PPD questionnaire with the patient.

- A. The patient will receive a chest x-ray. An exception to getting a chest x-ray is if the patient reports that they have had a chest x-ray completed in the last 12 months. If the patient has had a

chest x-ray in the past 12 months, the nurse will need the patient to sign a release of information to the facility where the x-ray was taken and request a copy of the chest x-ray report for the patient's MCDC chart.

B. The physician on call will review the x-ray report and questionnaire, and examine the patient. If the x-ray report, the questionnaire and/or exam were suggestive of infectious pulmonary tuberculosis, the patient would immediately be referred to St. James Health Care for further evaluation. The patient would be transferred to St. James Health Care via ambulance. It is imperative that the nursing staff informs A-1 Ambulance and St. James of a possible infectious tuberculosis case.

III. If the patient does not have a history of a positive PPD, the nurse will administer the Mantoux test intradermal, typically on the left forearm and will read the test in 48 to 72 hours.

A. The area around the injection site is examined for evidence of induration (swelling that can be felt), not for erythema (redness). If there is induration with erythema around the induration, only the induration is measured.

B. The diameter of the indurated area is measured across the arm in millimeters.

C. If there is no induration, the nurse will record on the PPD lab slip a test result of 0 mm along with the time and date of the reading. If there is any induration, the nurse will record the exact measurement of induration on the PPD lab slip (documenting positive with no measurement is incorrect procedure), along with the time and date.

D. If the induration is 10 millimeters or greater, the test is classified as positive.

E. If the induration is a measurement of 5mm or greater but less than 10mm, a repeat PPD will be completed in one week. The physician on call or the IC nurse will read the repeat PPD in 48 to 72 hours and make a determination as to the tuberculosis status of the patient.

F. If the induration is less than 5 mm, the test is read as negative.

G. If the Mantoux test is read as positive, the nurse will complete a Positive PPD Questionnaire and offer the patient education related to the meaning of the conversion. The nurse will also complete the paperwork of the patient to receive a chest x-ray.

H. If the chest x-ray and questionnaire are not suggestive of infectious pulmonary TB, the nurse will report to the patient the results of the negative chest x-ray in a timely manner and offer additional explanation of the meaning of the positive conversion. The nurse will instruct the patient to contact their county health department or local physician upon discharge for further evaluation regarding prophylactic treatment.

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